u

F097/697 Ext US

Docket No.: 11016-0021

DECLARATION AND POWER OF ATTORNEY

low named inventor, I declare that:

As at blow named inventor, I declare that:

As at blow named inventor, I declare that:

My residence, post office address, and citizenship are as stated below next to my name. I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first, and joint inventor (if plural names are listed below) of the subject matter that is claimed and for which a patent is sought on the invention entitled

		ENT POUR SYSTEME DE CONDITI ing, in Particular for						
the specification of w	hich is attached hereto. Condition	oning System (as transloatent application Serial No. 10/697,566	ated)					
I hereby state that I have reviewe	d and understand the contents of the above identifi	ed specification, including the claims, as amended by any	amendment referred to above.					
Lacknowledge the duty to disclose information of which Lam aware and which is material to the examination of the patent application in accordance with 37 CFR §1.56.								
application which designates at le	ast one country other than the United States, lister	ny foreign application(s) for patent or inventor's certificate d below and have also identified below, by checking the sp aat of the application on which priority is not claimed.	e, or §365(a) of any PCT International ace, any foreign application for patent					
Prior Foreign Application(s)								
Number	Country	Day/Month/Year Filed	Priority Not Claimed					
0213892	FRANCE	04/11/2002						
I hereby claim the benefit under 3	5 U.S.C. §119(e) of any United States provisional	application(s) listed below.						
	Application Serial Number	Filing Date	•					
insofar as the subject matter of expangraph of 35 U.S.C. §112. I ac between the filing date of the prior Application Serial Number Each undersigned applicant he attorneys with full power of subsection Serial Correspondence to: CLA I hereby declare that all statements statements were made with the known of the prior of the pri	ach of the claims of this application is not disclose knowledge the duty to disclose information known application and the national or PCT international further Filing Date Filing Date Treeby appoints CONRAD J. CLARK (Registratitution to prosecute the subject application and RK & BRODY, 1750 K Street, NW, Suite 600, s made herein of my own knowledge are true and	Status (patented, pending, abanation No. 30,340) and CHRISTOPHER W. BRODY (to transact all business in the Patent and Trademark C Washington, DC 20006; Telephone: 202-835-1111 that all statement made on information and belief are belief are punishable by fine or imprisonment, or both, under	on in the manner provided by the first 7 CFR §1.56 which became available doned) Registration No. 33,613), as his Office connected therewith. Facsimile: 202-835-1755. Eved to be true; and further that these					
Full name of sole or first invento	r: Manuel Nogueira							
Inventor's signature:	Hogueira.	manuel Date: 20 no	embre 2003					
Residence:	La Ferte Saint Aubin, France							
Citizenship:	France							
Post Office Address:	40 route de Ligny, 45240 La Ferte Saint Ai	ibin, France						
Full name of second joint invent	or, if any: Patrick Dupont							
Inventor's signature:	Jupont Dupont	Pahick. Date: 1/2/4	103					
Residence:	Saint de Braye, France							
Citizenship:	France							
Post Office Address:	7 allee des Bleuets, 45800 Saint de Braye,	Erance :						

__x__ third and subsequent joint inventors are listed on second sheet

Full name of third joint inventor, i	if any: <u>Etienne Brue</u>	ž				
Inventor's signature:		Etienne	BRUET	Date: <u>A</u> Z	7 nov. 2003	
Residence:	•					
Citizenship:	France	-				
Post Office Address:	286 Faubourg Ban	nier, 45400 Fleury	les Aubrais, France			
Full name of fourth joint inventor,	, if any:			, 		
Inventor's signature:				Date:		
Residence:						
Citizenship:						
Post Office Address:	·		· · · · · · · · · · · · · · · · · · ·			
	•					
Full name of fifth joint inventor, if	any:					
Inventor's signature:		4-9		Date:	-	
Residence:						
Citizenship:						
Post Office Address:			-			
M p						
Full name of sixth joint inventor, it	f any:				· · · · · ·	
Inventor's signature:			., .	Date:		
Residence:						
Citizenship:						
Post Office Address:		 				